FORM D

### UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

# OMB APPROVAL OMB Number: Expires: Estimated average burden hours per response



### FORM D

## NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

SEC USE ONLY								
Prefix		Serial						
ŀ								
DATE RECEIVED								

Name of Offering (☐ check if the	nis is an amendment and name	has changed, and indicate change.)	000
Behringer Harvard St. Rose R		8€6 Mail Processing	
Filing Under (Check box(es) tha			
Type of Filing: ☑ New Filing			C S and
		ASIC IDENTIFICATION DATA	JAN - 9 2008
1. Enter the information request	ed about the issuer		<del></del>
Name of Issuer (☐ check if this	is an amendment and name ha	is changed, and indicate change.)	Washington, DC
Behringer Harvard St. Rose R	EIT, LLC	-	102
Address of Executive Offices		(Number and Street, City, State, Zip Cod	ie) Telephone Number (Including Area Code)
15601 Dallas Parkway, Suite 6	00, Addison, Texa; 75001		214-655-1600
Address of Principal Business C	perations	(Number and Street, City, State, Zip Coc	le) Telephone Number (Including Area Code)
(if different from Executive Off	ices)		
Brief Description of Business			
Multifamily community real e	state investments		
Type of Business Organization			
☐ corporation	☐ limited partnersh	ip, already formed 🗵 other	(please specify): limited liability company
☐ business trust	☐ limited partnersh	ip, to be formed	PROCESSE
		Month Year	7 *** * * * * * * * * * * * * * * * * *
		n n n n ⊠ Actual □	LEstimated JAN 1 2008
Actual or Estimated Date of Inc	orporation or Organization:	[0] [7] [0] [7] ⊠ Actual □	THOMSON
Jurisdiction of Incorporation or	Organization:	(Enter two-letter U.S. Postal Service	abbreviation for State: FINANCIAL
		CN for Canada: FN for other foreign	iurisdiction)

### **GENERAL INSTRUCTIONS**

#### Federal

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6)

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

### ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

			A. BASIC I	DENTIFICATION DATA	1					
2.	Enter the information rec	uested for the fol	lowing:		•	•				
	Each promoter of the issuer, if the issuer has been organized within the past five years;									
	• Each beneficial own issuer;	ner having the pov	wer to vote or dispose,	or direct the vote or disposi	tion of, 10% or m	ore of a class of equity securities of the				
	Each executive offi	cer and director o	f corporate issuers and	of corporate general and m	anaging partners o	of partnership issuers; and				
	Each general and m	anaging partner o	of partnership issuers.							
Chec	ck Box(es) that Apply:	☐ Promoter	☑ Beneficial Owner	Executive Officer	☐ Director	☑ Manager				
Full	Name (Last name first, if	individual)								
Behr	ringer Harvard St. Rose	Venture, LLC								
Busi	ness or Residence Addres	s (Number and S	Street, City, State, Zip (	Code)						
1560	)1 Dallas Parkway, Suite	600, Addison, T	'exas 75001							
Chec	ck Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	r	☐ Director	☐ General and/or Managing Partner				
Full	Name (Last name first, if	individual).	,							
Busi	iness or Residence Addres	s (Number and S	Street, City, State, Zip	Code)						
Chec	ck Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	r   Executive Officer	☐ Director	☐ General and/or Managing Partner				
Full	Name (Last name first, if	individual)								
Busi	iness or Residence Addres	s (Number and	Street, City, State, Zip	Code)		1 18				
Chec	ck Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	r 🛘 Executive Officer	☐ Director	☐ General and/or Managing Partner				
Full	Name (Last name first, if	individual)			,					
Busi	iness or Residence Addres	ss (Number and	Street, City, State, Zip	Code)						
Chec	ck Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	r □ Executive Officer	☐ Director	☐ General and/or Managing Partner				
Full	Name (Last name first, if	individual)								
Busi	iness or Residence Addres	ss (Number and	Street, City, State, Zip	Code)						
Chec	ck Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	r   Executive Officer	☐ Director	☐ General and/or Managing Partner				
Full	Name (Last name first, if	individual)								
Busi	iness or Residence Addres	ss (Number and	Street, City, State, Zip	Code)						
Chec	ck Box(es) that Apply:	☐ Promoter	☐ Beneficial Owne	r 🗆 Executive Officer	☐ Director	☐ General and/or Managing Partner				
Full	Name (Last name first, if	individual)	<del>-</del>							
Busi	iness or Residence Addres	ss (Number and	Street, City, State, Zip	Code)						
Chec	ck Box(es) that Apply:	☐ Promoter	Cl Beneficial Owner	Executive Officer	☐ Director	☐ General and/or Managing Partner				
Full	Name (Last name first, if	individual)	·			1 1 1 11				
Busi	iness or Residence Addre	ss (Number and	Street, City, State, Zip	Code)						

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			_		В. І	NFORM	ATION A	BOUT OF	FERING	}		<u> </u>		
													Yes	No
1. Ha	s the issue	r sold, o	or does t	he issuer i	ntend to se	ll, to non-	accredited	investors in	ı this off	ering?			. 🗆	X
				Answer a	ılso in App	endix, Co	lumn 2, if	filing under	ULOE					
2. W	hat is the n	ninimun	n invest	ment that v	will be acco	epted fron	any indiv	idual?					. \$ 500	
													Yes	No
			-		-									X
sin an bro	nilar remu associated oker or dea	neration I person iler. If i	for soli or agen more tha	citation of t of a brok	purchasers er or deale persons to	s in conne r registere	ction with d with the	sales of sec SEC and/or	urities in r with a	the offeri state or sta	directly, any or	on to be listed me of the	d is	
Full Name (L	ast name i	first, if i	ndividu	al)										
H & L Equit	ties, LLC													
Business or R	Residence .	Address	(Numb	er and Stre	et. City, S	tate, Zip C	Code)							
1175 Peachti	ree Street	, <b>N</b> ,E., 1	100 Col	ony Squar	e, Suite 21	20, Atlan	ta, Georg	ia 30361-62	206		_	_		
Name of Asse	ociated Br	oker or	Dealer											
States in Whi	ich Person	Listed	Has Soli	icited or In	itends to So	olicit Purc	hasers							
(Check	"All State:	s" or ch	eck indi	vidual Stat	tes)							🗀 Al	1 States	
[Al	L) [A	K}	(AZ)	[AR]	[CA]	[CO]	(CT)	[DE]	[DC]	[FL] ⊠	[GA] ⊠	(HI)	[ID]	
(IL	.) [18	<b>i</b> ]	[IA]	[KS]	[KY]	[LA]	(ME)	[MD]⊠	[MA]	[MI]	[MN]	[MS]	[MO]	
[M	T] [N]	E)	[NV]	[NH]	[141]	[NM]	[NY]	[NC] ⊠	[ND]	[OH]	[OK]⊠	[OR]	[PA]⊠	
{RI	[SC	C) (	[SD]	[TN]⊠	[TX] ⊠	(UT)	[VT]	[VA] ⊠	[WA]	[WV]	[WI]	[WY]	[PR]	
Full Name (L	ast name	first, if i	indiviđu	al)										
Business or F	Residence	Address	s (Numb	er and Stre	eet. City, S	tate, Zip (	Code)						-	
Name of Ass	ociated Br	oker or	Dealer		,						<u> </u>			
States in Whi	ich Person	Listed	Has Sol	icited or Ir	ntends to Se	olicit Purc	hasers			<u> </u>				
(Check	"All State	s" or ch	eck indi	vidual Sta	tes)							🗆 Al	Il States	
[Al	L] (A	K]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]	
[IL	.] [[	1]	[IA]	[KS]	[KY]	[LA]	[ME]	(MD)	[MA]	[MI]	[MN]	[MS]	[MO]	
[M	T] {N	E) :	[NV]	[NH]	[[[1]]	[NM]	[NY]	[NC]	[ND]	(OH)	[OK]	[OR]	[PA]	
(RI	I) [S0	<u> </u>	(SD)	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]	
Full Name (L	ast name	first, if	individu	al)										
Business or F	Residence	Address	s (Numb	er and Str	eet, City, S	tate, Zip (	Code)		· · · · · ·	<u> </u>				
Name of Ass	ociated Br	oker or	Dealer											
States in Wh									_					
(Check	"All State	s" or ch	eck indi	ividual Sta	tes}					••••••		🗖 Al	II States	
[A]	L] [A	K]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]	
[IL	.) [18	4]	[IA]	[KS]	[KY]	[LA]	(ME)	[MD]	[MA]	(MI)	[MN]	[MS]	[MO]	
[M	(T) [T	E]	[NV]	[NH]	[141]	[NM]	[NY]	[NC]	[ND]	(OH)	[OK]	[OR]	[PA]	
[RI	[Se	C)	[SD]	[TN]	[TX]	(UT)	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	(PR)	

(Use blank sheet, or copy and use additional copies of this sheet, if necessary.)

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PR	OCI	EEDS		
i.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box $\square$ and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.				
	Type of Security		Aggregate fering Price	Ап	nount Already Sold
	Debt		•	\$	-0-
	Equity		62,000	\$	62,000
	• •	<u>»</u>	02,000	<u> </u>	62,000
	☐ Common ☑ Preferred				0
	Convertible Securities (including warrants)			<u>*</u>	-0-
	Partnership Interests		-0-	<u>&gt;</u>	-0-
	Other (Specify)			<u>\$</u>	-0-
	Answer also in Appendix, Column 3, if filing under ULOE.	<u>\$</u>	62,000	<u>\$</u>	62,000
2.	Enter the number of accredited and non-accredited investors, who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."				Aggregata
	the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0"		Number Investors	D	Aggregate ollar Amount of Purchases
	the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		Investors	D	ollar Amount
	the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0"		Investors	D	ollar Amount of Purchases
	the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."  Accredited Investors	_	Investors 124 -0-	Do	ollar Amount of Purchases 62,000
	the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."  Accredited Investors	_	Investors 124 -0-	\$ \$	ollar Amount of Purchases 62,000 -0-
3.	the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."  Accredited Investors  Non-accredited Investors  Total (for filings under Rule 504 only).	_	Investors 124 -0-	\$ \$	ollar Amount of Purchases 62,000 -0-
	the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."  Accredited Investors	_	Investors 124 -0-	\$ \$ \$	ollar Amount of Purchases 62,000 -0- N/A
	Accredited Investors  Non-accredited Investors  Total (for filings under Rule 504 only)  Answer also in Appendix, Column 4, if filing under ULOE.  If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C – Question 1.	_	Investors 124 -0- N/A	\$ \$ \$	ollar Amount of Purchases 62,000 -0-
	Accredited Investors  Non-accredited Investors  Total (for filings under Rule 504 only)  Answer also in Appendix, Column 4, if filing under ULOE.  If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C – Question 1.		Investors  124  -0-  N/A  Type of Security	\$ \$ \$	ollar Amount of Purchases 62,000 -0- N/A
	Accredited Investors  Non-accredited Investors  Total (for filings under Rule 504 only)  Answer also in Appendix, Column 4, if filing under ULOE.  If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C – Question 1.  Type of offering		124 -0- N/A  Type of Security	\$ \$ \$	ollar Amount of Purchases 62,000 -0- N/A
	the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."  Accredited Investors		Investors  124  -0-  N/A  Type of Security	\$ \$ \$	ollar Amount of Purchases 62,000 -0- N/A

4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.

Transfer Agent's Fees	🗵 <u>\$</u>	-0-
Printing and Engraving Costs	⊠ <u>\$</u>	-0-
Legal Fees		
Accounting Fees		
Engineering Fees		
Sales Commissions (specify finders' fees separately)		
Other Expenses (identify) filing fees - \$1,500; consulting fees - \$23,375; expense reimbursement - \$1,500		26,370
Total		38,045

total expenses furnished in response to Part C - Que	gate offering price given in response to Part C- Question 1 as stion 4.a. This difference is the "adjusted gross proceeds to	he			\$_		23,955
5. Indicate below the amount of the adjusted of the purposes shown. If the amount of a	gross proceeds to the issuer used or proposed to be used for any purpose is not known, furnish an estimate and check the ayments listed must equal the adjusted gross proceeds to the	each box to	)				
				Payments to Officers, Directors, & Affiliates			yments to Others
Salaries and fees		🗵	<u>\$</u>	-0-	⊠	<u>\$</u>	-0-
Purchase of real estate		🗵	<u>\$</u>	-0-	Ø	<u>\$</u>	-0-
Purchase, rental or leasing and installation	n of machinery and equipment	🗵	<u>\$</u>	-0-	×	<u>\$</u>	-0-
Construction or leasing of plant buildings	and facilities	🛭	<u>\$</u>	0-	×	<u>\$</u>	0
	g the value of securities involved in this offering that may be es of another issuer pursuant to a merger)		<u>\$</u>	-0-	×	<u>\$</u>	-0-
Repayment of indebtedness		🗷	<u>\$</u>	-0-	×	<u>\$</u>	-0-
Working capital		🗵	<u>\$</u>	-0-	×	<u>\$</u>	23,955
Other (specify):		🖾	<u>\$</u>	-0-	×	<u>\$</u>	-0-
Column Totals		🛭	<u>\$</u>	-0-	☒	<u>\$</u>	23,955
Total Payments Listed (column unais auu	D FEDERAL SIGNATURE	·•		⊠ \$ 23,95	55		
	D. FEDERAL SIGNATURE						
	by the undersigned duly authorized person. If this notice is find the U.S. Securities and Exchange Commission, upon written or pursuant to paragraph (b)(2) of Rule 502.						
Issuer (Print of Type)	Signature Date						
Behringer Harvard St. Rose REIT, LLC	Janu	агу 3,	, 200	8			
Name of Signer (Print or Type)	Title of Signer (Print or Type)						
Gerald J. Reihsen, IIII	Executive Vice President-Corporate Development & Lo St. Rose, LLC, the manager of Behringer Harvard St. I Issuer						
	ATTENTION						
Intentional misstatements of	or omissions of fact constitute federal criminal violations.	(See	18 T	S.C. 1001.)			

**END**